

AGN. NO. _____

MOTION BY SUPERVISOR DON KNABE

October 13, 2009

Everyday in the County of Los Angeles millions of home-generated sharps waste such as medical needles, lancets, and syringes are produced by individuals who self administer medications at home. If disposed of improperly, sharps waste poses a significant health risk to everyone, especially sanitation and landfill workers. In addition, surface waters, groundwater, and the ocean may be polluted as a result of leakage from leftover liquid in sharps devices.

Since last September, State law (SB 1305) prohibits the placement of home-generated sharps waste in trash and recycling containers, and requires the use of State-approved containers for the collection and transportation of sharps waste. State law also encourages local governments to implement and promote sharps collection programs to provide convenient and safe means for residents to dispose of their sharps waste.

To assist residents in complying with this new State law, in June 2008 Public Works in concert with Public Health and participating cities launched a new Sharps

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Waste Management Program. The aim of the Program is to make it as convenient as possible for residents to properly dispose of their sharps waste. Through this Program, Public Works provides State-approved, puncture-proof containers for residents to safely collect their sharps waste. These containers can be obtained free of charge at over 100 distribution sites.

Once filled, the sharps containers can be taken to designated collection sites for safe disposal. Designated collection sites currently include 8 permanent household hazardous waste collection centers and the County's weekly household hazardous waste collection events. In addition, the Department of Public Health took a proactive approach in joining Public Work's efforts to make available 14 public health clinics as collection sites for County residents to dispose of sharps waste. The disposal cost for the sharps waste is incurred by Public Health as part of their existing internal sharps waste program. In collaboration, Public Works assists with providing sharps containers for distribution, as well as outreach materials for public education. This collaborative partnership is a great example of departments working together to provide beneficial public service to the communities. Considering the size and population of Los Angeles County however, there is a need to expand the number of sites where residents can take their filled sharps containers. To the extent feasible, we should utilize County facilities for this purpose.

Certain County departments, such as the Fire Department, also have a need for proper disposal outlets for the sharps waste they collect when they treat patients through their emergency services. Thus, opportunities exist for additional collaborative

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partnerships between Public Works and other County departments for properly managing sharps waste and increasing public awareness.

I, THEREFORE, MOVE that the Board of Supervisors instruct the Director of Public Works, working in collaboration with the Directors of Health Services, Community and Senior Services, Public Health and the Fire Chief of the Fire Department to pursue the following actions:

1. Identify and evaluate the potential for utilizing additional County facilities, such as fire stations, pharmacies, hospitals, and other locations, as sharps collection sites.
2. Implement collection sites at the most feasible locations on a 12-month trial basis, based on the Public Health model highlighted above. Costs should be equitably shared amongst participating departments.
3. Assess the feasibility of providing approved mail-back containers to assist the elderly, disabled, and others who are unable to utilize the County's expanded network of sharps collection sites.
4. Submit a report to the Board within 18 months summarizing the results of this effort. The report should include but not be limited to the following:
 - a. Success of the trial collection sites in enhancing the Program
 - b. Barriers/challenges faced
 - c. Public outreach and education implemented
 - d. Cost analysis
 - e. Recommendations on making collection sites permanent, further expanding collection and other adjustments to the Program.